

Union Calendar No.

118TH CONGRESS
1ST SESSION

H. R. 3836

[Report No. 118-]

To facilitate direct primary care arrangements under Medicaid.

IN THE HOUSE OF REPRESENTATIVES

JUNE 6, 2023

Mr. CRENSHAW (for himself, Ms. SCHRIER, Mr. SMUCKER, and Mr. BLUMENAUER) introduced the following bill; which was referred to the Committee on Energy and Commerce

AUGUST --, 2023

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italic]

[For text of introduced bill, see copy of bill as introduced on June 6, 2023]

A BILL

To facilitate direct primary care arrangements under
Medicaid.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 *This Act may be cited as the “Medicaid Primary Care*
5 *Improvement Act”.*

6 **SEC. 2. CLARIFYING THAT CERTAIN PAYMENT ARRANGE-**
7 **MENTS ARE ALLOWABLE UNDER THE MED-**
8 **ICAID PROGRAM.**

9 *(a) RULE OF CONSTRUCTION.—Nothing in title XIX*
10 *of the Social Security Act (42 U.S.C. 1396 et seq.) shall*
11 *be construed as prohibiting a State, under its State plan*
12 *(or waiver of such plan) under such title (including through*
13 *a medicaid managed care organization (as defined in sec-*
14 *tion 1903(m)(1)(A) of such Act)), from providing medical*
15 *assistance consisting of primary care services through a di-*
16 *rect primary care arrangement with a health care provider,*
17 *including as part of a value-based care arrangement estab-*
18 *lished by the State. For purposes of the preceding sentence,*
19 *the term “direct primary care arrangement” means, with*
20 *respect to any individual, an arrangement under which*
21 *such individual is provided medical assistance consisting*
22 *solely of primary care services provided by primary care*
23 *practitioners, if the sole compensation for such care is a*
24 *fixed periodic fee.*

1 (b) *GUIDANCE.*—Not later than 1 year after the date
2 of the enactment of this Act, the Secretary of Health and
3 Human Services shall—

4 (1) *convene at least one virtual open door meet-*
5 *ing to seek input from stakeholders, including pri-*
6 *mary care providers who practice under the direct*
7 *primary care model, state Medicaid agencies, and*
8 *Medicaid managed care organizations; and*

9 (2) *taking into account such input, issue guid-*
10 *ance to States on how a State may implement direct*
11 *primary care arrangements (as defined in subsection*
12 *(a)) under title XIX of the Social Security Act (42*
13 *U.S.C. 1396 et seq.).*

14 (c) *REPORT.*—Not later than 2 years after the date of
15 the enactment of this Act, the Secretary of Health and
16 Human Services shall submit to Congress a report con-
17 taining—

18 (1) *an analysis of the extent to which States are*
19 *contracting with independent physicians, independent*
20 *physician practices, and primary care practices for*
21 *purposes of furnishing medical assistance under State*
22 *plans (or waivers of such plans) under title XIX of*
23 *the Social Security Act (42 U.S.C. 1396 et seq.); and*

24 (2) *an analysis of quality of care and cost of*
25 *care furnished to individuals enrolled under such title*

1 *where such care is paid for under a direct primary*
2 *care arrangement (as defined in subsection (a))*
3 *through a medicaid managed care organization (as so*
4 *defined).*

5 *(d) RULE OF CONSTRUCTION.—Nothing in this section*
6 *shall be construed to alter statutory requirements under the*
7 *State plan (or waiver of such plan) under title XIX of the*
8 *Social Security Act (42 U.S.C. 1396 et seq.) for cost-sharing*
9 *requirements or be construed to limit medical assistance*
10 *solely to those provided under a direct primary care ar-*
11 *angement.*